STATE OF CONNECTICUT DEPARTMENT OF TRANSPORTATION ATTN: MANAGER OF CONTRACTS, RM 1318

2800 BERLIN TURNPIKE, PO BOX 317546 NEWINGTON, CONNECTICUT 06131-7546

TELEPHONE: (860) 594-3390

| DATE: |
|-------|
|-------|

ORDER FORM To insure prompt processing and delivery of your order(s), please include the following information on the order form and return

| ompany Name: | | Addressee: | |
|-------------------------------|--------------------------------|---|--|
| <u> </u> | | Addressee: Pers | son to whom the order will be delivered |
| | | | |
| ii sii eet aaaress. | UPS does not deliver to P. | O. Boxes, include full street address where | order is to be delivered |
| ty | | State | Zip code |
| | | | |
| elephone No.(|) | Facsimile No. (|) |
| | | CHECK TYPE OF ORDER | |
| PLANS & SPECIFICA | TIONS | | M 12 12 12 12 1 |
| State Project Number(s) | Size (small or regula | nr) Quantity | Please indicate if order is for partial sets i.e. bridge or mechanical set |
| | | | |
| Cost | | Postage & Handling | Sub - Total |
| | + \$ | 2 + | = \$ |
| All Connecticut firms must in | clude Connecticut Sales Tax. S | + \$ Sales tax should not be included for mail orde | r requests from firms located outside Conn |
| | | (| Quantity |
| "NOTICE TO CONTRA | CTORS" SUBSCRIPTION | , CALENDAR YEAR 2006= \$130.00 X | = \$ |
| FORM 816 STANDARD | SPECIFICATION 2004, (I | F PICKED UP \$16.00) = \$20.00 X_ | = \$ |
| | | ahaak am | ount = \$ |
| neck or money order numb | er | Clieck alli | Grand Total |

NOTE: All prospective bidders wishing to obtain Proposal Forms must submit a completed Qualification Affidavit (Part C) prior to the granting of such proposal documents.

NOTE: Plans, Specifications, 814A and 815 Standard Specifications may be purchased in person at DOT Plans Sales Office, 160 Pascone Place, Newington CT. Business hours: 8:30 a.m. to 4:00 p.m. Monday through Friday.